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PTO/SB/03 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**PLANT PATENT
APPLICATION (35 U.S.C. 161)
DECLARATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	POULdom APP
First Named Inventor	L. Pernille Olesen
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	1661
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the new and distinct variety of:

Floribunda Rose

plant named: **POULdom**

which is claimed and for which a plant patent is sought, the specification of which

is attached hereto OR was filed on (MM/DD/YYYY) as United States

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim, as amended by any amendment specifically referred to above.

I have asexually reproduced the plant to which this application applies.

Said plant was found in a cultivated area (check this box for newly found plant only)

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
EU3382	EU	07/06/1998	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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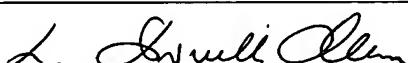
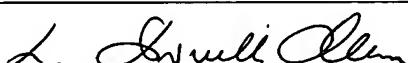
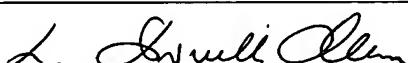
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DECLARATION – Plant Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.																																																										
Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input type="text"/>		<input type="checkbox"/> OR <input checked="" type="checkbox"/> Correspondence address below																																																										
<p>Name Mogens N. Olesen</p> <p>Address 620 S. Front Street</p> <p>Address</p> <table border="1"> <tr> <td>City Central Point</td> <td>State OR</td> <td>ZIP 97502</td> </tr> <tr> <td>Country USA</td> <td>Telephone 541-245-8050</td> <td>Fax 541-665-2252</td> </tr> </table> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p> <p>NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor</p> <table border="1"> <tr> <td>Given Name L. Pernille</td> <td>Family Name or Surname Olesen</td> </tr> <tr> <td>Inventor's Signature </td> <td>Date April 30, 2003</td> </tr> <tr> <td>Residence: City Fredensborg</td> <td>State</td> <td>Country Denmark</td> <td>Citizenship Danish</td> </tr> <tr> <td colspan="4">Mailing Address Hillerodvejen 49</td> </tr> <tr> <td colspan="4">Mailing Address</td> </tr> <tr> <td>City Fredensborg</td> <td>State</td> <td>Zip DK-3480</td> <td>Country Denmark</td> </tr> <tr> <td colspan="2">NAME OF SECOND INVENTOR:</td> <td colspan="2"><input type="checkbox"/> A petition has been filed for this unsigned inventor</td> </tr> <tr> <td>Given Name Mogens N.</td> <td>Family Name or Surname Olesen</td> <td colspan="2"></td> </tr> <tr> <td>Inventor's Signature </td> <td>Date April 30, 2003</td> <td colspan="2"></td> </tr> <tr> <td>Residence: City Fredensborg</td> <td>State</td> <td>Country Denmark</td> <td>Citizenship Danish</td> </tr> <tr> <td colspan="4">Mailing Address Hillerodvejen 49</td> </tr> <tr> <td colspan="4">Mailing Address</td> </tr> <tr> <td>City Fredensborg</td> <td>State</td> <td>Zip DK-3480</td> <td>Country Denmark</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Additional inventors are being named on the ___ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.</td> </tr> </table>			City Central Point	State OR	ZIP 97502	Country USA	Telephone 541-245-8050	Fax 541-665-2252	Given Name L. Pernille	Family Name or Surname Olesen	Inventor's Signature 	Date April 30, 2003	Residence: City Fredensborg	State	Country Denmark	Citizenship Danish	Mailing Address Hillerodvejen 49				Mailing Address				City Fredensborg	State	Zip DK-3480	Country Denmark	NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		Given Name Mogens N.	Family Name or Surname Olesen			Inventor's Signature 	Date April 30, 2003			Residence: City Fredensborg	State	Country Denmark	Citizenship Danish	Mailing Address Hillerodvejen 49				Mailing Address				City Fredensborg	State	Zip DK-3480	Country Denmark	<input type="checkbox"/> Additional inventors are being named on the ___ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			
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